

Minutes of the meeting of the Human Resources Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, October 14, 2010 at the hour of 7:30 A.M. at John H. Stroger, Jr. Hospital of Cook County, 1901 W. Harrison Street, in the fifth floor conference room, Chicago, Illinois.

## **I. Attendance/Call to Order**

Acting Chairman Golden called the meeting to order at approximately 7:45 A.M. A quorum was not present; however, the Committee began to receive information. A quorum was reached when Chairman Zopp assumed the Chair at approximately 7:50 A.M.; the Committee began to consider the items presented.

Present: Chairman Andrea L. Zopp and Directors Quin R. Golden and Sister Sheila Lyne, RSM (3)  
Director Hon. Jerry Butler

Absent: Directors David Carvalho and Jorge Ramirez (2)

Additional attendees and/or presenters were:

Michael Ayres  
Patrick T. Driscoll, Jr.  
William T. Foley

Patricia Kelleher, MD  
Elizabeth Reidy  
Deborah Santana

Deborah Tate  
Anthony J. Tedeschi, MD, MPH, MBA

## **II. Public Speakers**

Chairman Zopp asked the Secretary to call upon the registered speakers.

The Secretary called upon the following registered public speaker:

1. George Blakemore                      Concerned Citizen

## **III. \*\*Report from System Director of Human Resources** (Attachment #1)

Deborah Tate, System Director of Human Resources, provided an update on the following activities: implementation of the Taleo System; 100 in 100 – A Targeted Nursing Recruitment Campaign; and update on the Personnel Rules.

During the discussion of the update on the Taleo System, Director Golden inquired whether there would be an additional cost associated with the contract extension, or whether the contract was based upon deliverables. Ms. Tate responded that she was unsure if there was a cost associated with the extension, but indicated that the Taleo contract is with the County, not with the System.

## **IV. Recommendations, Discussion/Information Items**

### **A. Leadership Report – Organizational Re-design** (Attachment #2)

William T. Foley, Chief Executive Officer of the Cook County Health and Hospitals System, presented a report on the System's organizational re-design that has taken place over the past eighteen months. He noted that he will provide more information at a later date on how the organizational re-design impacts all levels of the organization. Additionally, information on the organizational structures at the affiliate level will be provided.

#### **IV. Recommendations, Discussion/Information Items**

##### **A. Leadership Report – Organizational Re-design (continued)**

Director Lyne inquired regarding the use of consultants. Mr. Foley indicated that, in terms of consulting services, the following are companies providing the majority of consulting services at the System: PricewaterhouseCoopers - providing services as part of the performance improvement initiative, which includes Revenue Cycle activities; ACS - providing services as a partial outsourcing of information technology services, and some services relating to the Lawson System; and Health Management Associates (HMA) - providing consulting services relating to Medicaid strategies. He noted that a request for proposals (RFP) has been issued for the partial outsourcing of information technology services; these services are meant to supplement staffing, as many of these types of positions are difficult to recruit.

The Committee discussed some of the positions listed within the organization, with regard to functions and whether they were expected to be needed only for a specific period, or whether they were expected to be permanent. Director Golden inquired regarding the position title of System Director of Human Resources; she asked whether this position should instead be titled Chief of Human Resources. Mr. Foley responded that he has discussed the subject with Ms. Tate; the title that would be consistent with the industry would be Chief Human Resources Officer.

With regard to the performance improvement initiative activities of PricewaterhouseCoopers, Director Golden asked how ownership is shown for each of the initiatives. Mr. Foley responded that he can provide an organizational structure for the performance improvement project, which includes an executive sponsor and statement of work for each of the eight initiatives.

##### **B. Update on employee influenza vaccination program**

Dr. Patricia Kelleher, Director of Employee Health Services at John H. Stroger, Jr. Hospital of Cook County, provided an update on the employee influenza vaccination program. She presented a program summary through April 30, 2010 (Attachment #3).

Dr. Kelleher provided information on employee educational efforts. She stated that the educational programs will be System-wide, and will include online training for all employees.

##### **C. Update and discussion of pending information requests**

There were no pending information requests to be discussed at this time.

#### **V. Action Items**

##### **A. Any items listed under Sections IV, V and VI**

**VI. Closed Session Discussion/Information Items**

- A. Discussion of personnel matters**
- B. Update on labor negotiations**
- C. \*\*Report from System Director of Human Resources**

Director Golden, seconded by Director Lyne, moved to recess the regular session and convene into closed session, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), which permits closed meetings for consideration of “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” and 5 ILCS 120/2(c)(2), regarding “collective negotiating matters between the public body and its employees or their representatives, or deliberations concerning salary schedules for one or more classes of employees.”

On the motion to recess the regular session and convene into closed session, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chairman Zopp and Directors Golden and Lyne (3)

Nays: None (0)

Absent: Directors Carvalho and Ramirez (2)

THE MOTION CARRIED UNANIMOUSLY and the Committee convened into closed session.

Chairman Zopp declared that the closed session was adjourned. The Committee reconvened into regular session.

**VII. Adjourn**

Director Golden, seconded by Director Lyne, moved to adjourn. THE MOTION CARRIED UNANIMOUSLY AND THE MEETING ADJOURNED.

Respectfully submitted,  
Human Resources Committee of the  
Board of Directors of the  
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Ms. Andrea Zopp, Chairman

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Deborah Santana, Secretary

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ATTACHMENT #1



# **HR Committee Meeting**

**October 14, 2010**

**CCHHS**

# Taleo Next Steps

- ☐ The Taleo consultant has provided support on the following:
  - ☐ Technical Fixes
  - ☐ Functionality
  - ☐ Content
- ☐ CCHHS continues to move forward with System training through the end of October
- ☐ County contract that ends this month
  - ☐ Still need on-boarding, integration and report management support

# COOK COUNTY HEALTH & HOSPITALS SYSTEM



## 100 in 100: A Targeted Nursing Recruitment Campaign

Cook County Health and Hospitals System  
October 2010



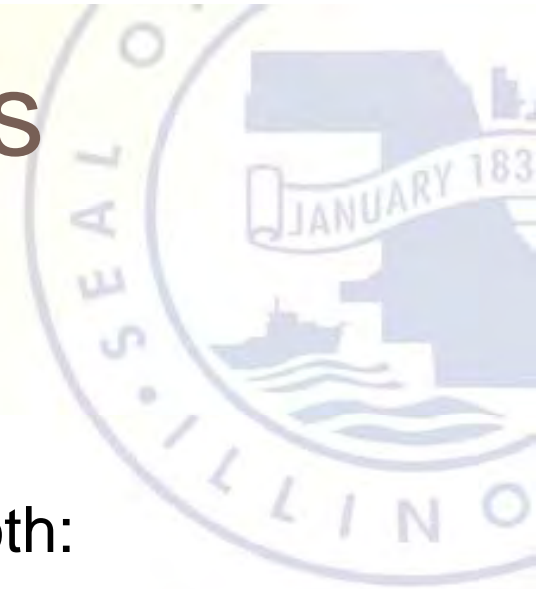
# 100 in 100 Update

- ❑ Selecting High Performers through Behavioral Interviewing training for Nursing Leadership is scheduled for October 7<sup>th</sup> and 8<sup>th</sup>
- ❑ Media plan is in final draft with a focus on targeting minority/diversity recruitment, particularly Hispanic
- ❑ Recruiting Contractor begins on 10/12 to support this effort
- ❑ Format for Employee Referral Incentive plan has been completed; working on processing details
- ❑ Two new programs included in this campaign
  - ❑ On-Boarding and Peer Mentoring
  - ❑ HR 60/90

CCHHS



# Personnel Rules (update)



- ☐ Personnel Rules were effective July 1<sup>st</sup>
- ☐ Amendments completed last month to both:
  - ☐ Rule 9.05, Grievance Procedure requires a change adding language and re-publishing this Rule
  - ☐ *Important Notice*, addition of Cook County Shakman Compliance Administrator language
- ☐ Personnel Rules placed on the CCHHS Intranet
- ☐ Distributed to the Leadership and Management team

**CCHHS**

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ATTACHMENT #2



# **Leadership Report Organizational Re-design**

**October 2010**

# Agenda

- Overview
- Span of Control
- Centralization
- Redesign
- Future Development



# Overview



## Goal

Develop an organizational structure that is cost effective and positions CCHHS for successful implementation of the Strategic Plan

## Guiding Principles

- ◆ Span of control is lean and effective
- ◆ Services centralized to reduce duplication and take advantage of economies of scale
- ◆ Operational structure supports leadership and promotes accountability
- ◆ Recruit and develop talent necessary for successful execution of the Strategic Plan

# Overview



## Challenges

- ◆ Management is challenged by the volume and complexity of work
- ◆ Core management processes are poorly defined and require redesign
- ◆ Managing in a matrix environment is unfamiliar for many
- ◆ In clinical departments, accountability for department management is not clearly defined between physicians and department managers
- ◆ Communication is inconsistent across and within system affiliates
- ◆ Accountability for performance needs to be built into the organization at all levels



# Overview

## Re-structuring Strategies



### Span of Control

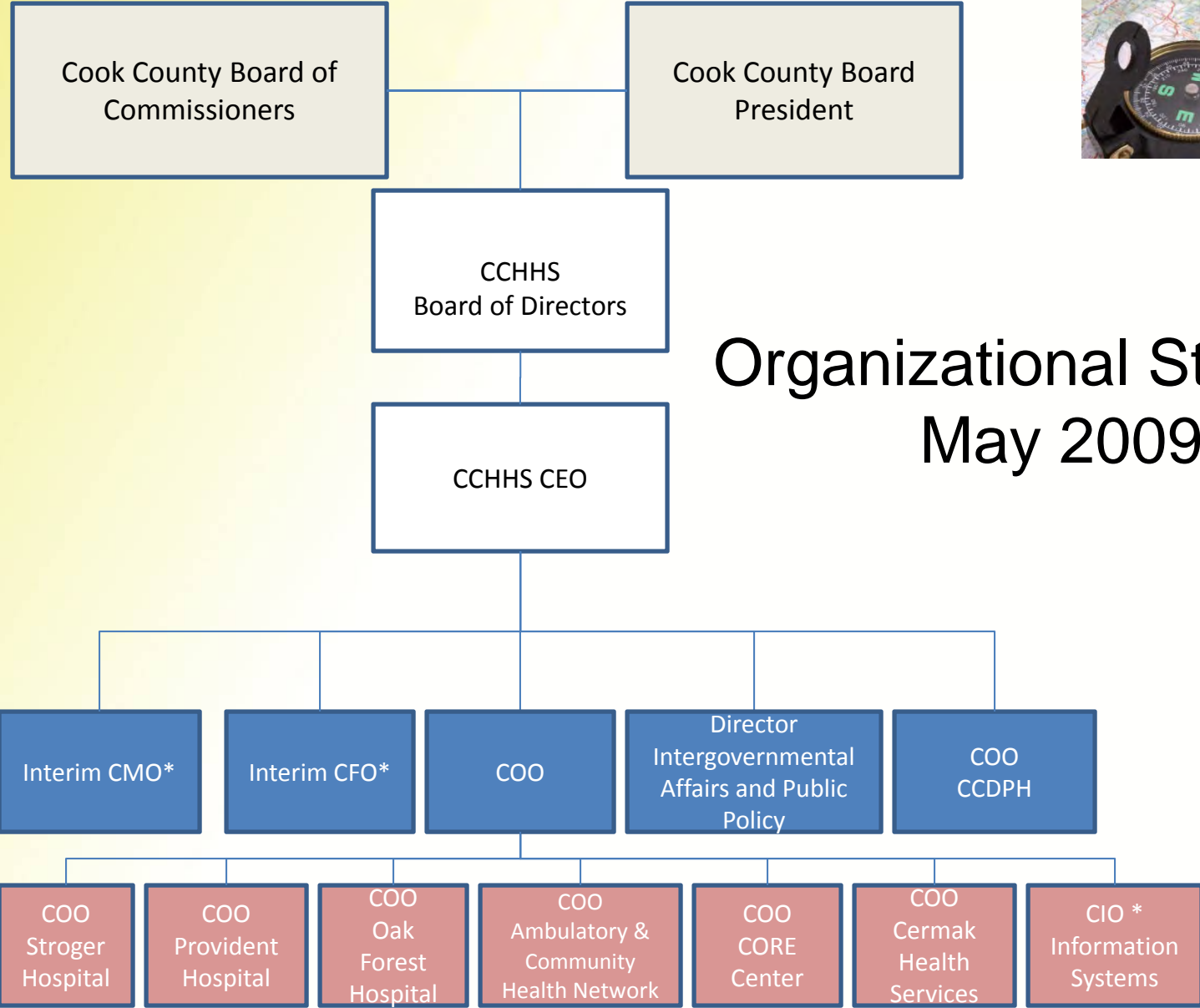
- Reduce management layers
- Eliminate redundant job functions
- Modify ratio of management to non-management staff
- Improve accountability

### Centralization

- Systemness
- Similar services consolidated under one management structure
- Economies of scale
- Acquiring talent which supports System and shared services approach

### Redesign

- Developing management skills to support System operations and strategic focus
- Build/strengthen infrastructure to support System operations



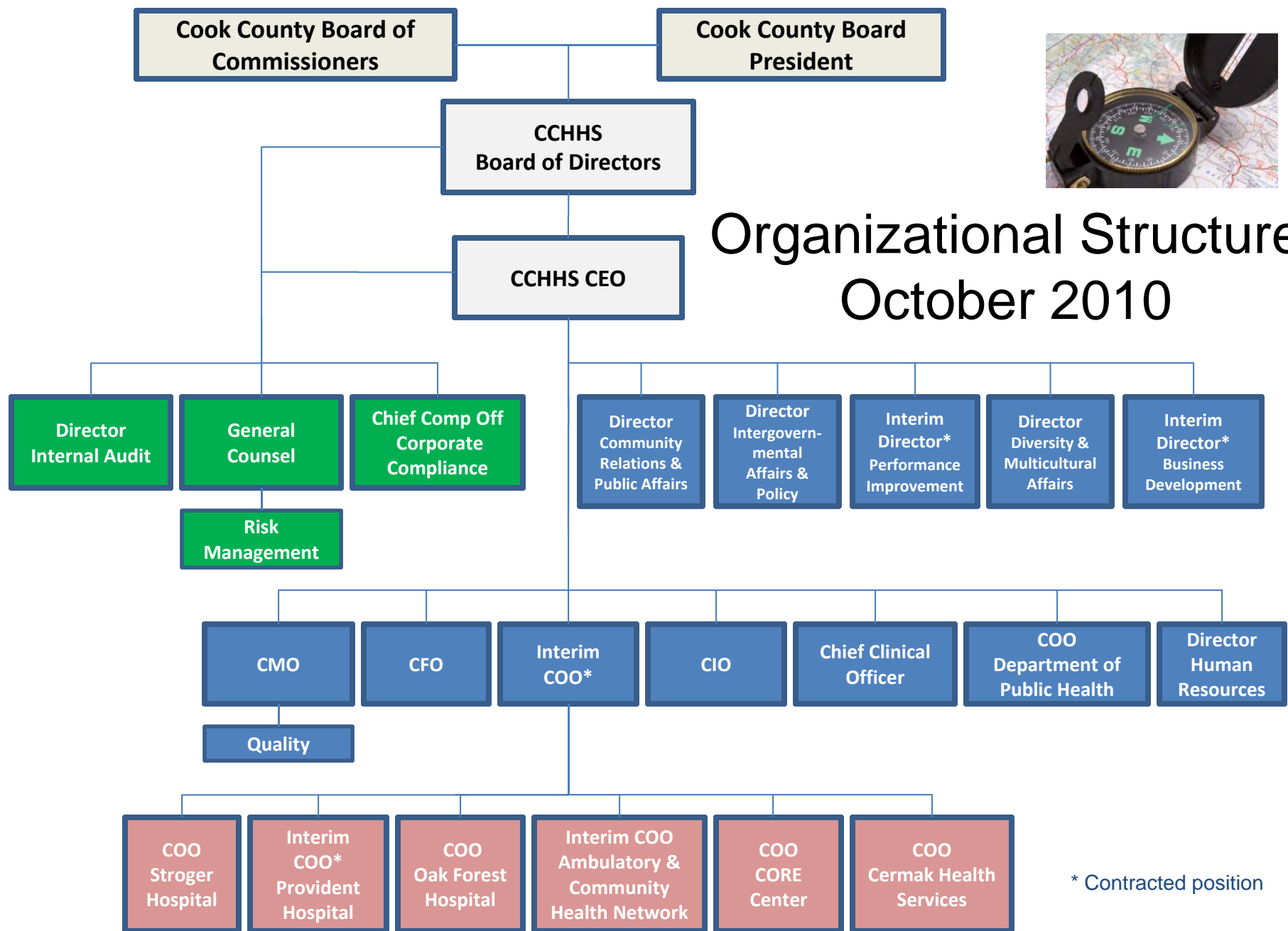
# Organizational Structure

## May 2009

\* Contracted position







# Span of Control - Key Accomplishments

Areas of Focus	Accomplishments
Nursing & Peri-operative Services	<ul style="list-style-type: none"><li>- Eliminated/revised several Nursing Director and Associate Director positions across JSH, OFH and PH to streamline reporting to CNO's.</li><li>- Consolidated Endoscopy and Surgery under a single director for more cohesive management.</li></ul>
Support Services - Building/Grounds/Trades	Centralized reporting structure for Building Maintenance/Grounds/Trades for improved span of control; trade employees now moving between sites resulting in improved efficiency.
Medical Staff	Revised reporting structure of medical staff leadership for more effective span of control.

# Centralization - Key Accomplishments

Areas of Focus	Accomplishments
Leadership	Centralized system leadership reporting structure– hospital COOs report to System COO, hospital CFOs report to System CFO, hospital CNOs report to System Chief Clinical Officer.
Clinical and Non-Clinical Operations	Centralized key clinical (Lab, Pharmacy) and non-clinical (Public Relations, Building & Grounds) departments under one director, consolidating services.
Management Functions	Developed system-wide position control and capital equipment purchasing.
Procurement	Consolidated procurement under a single system-wide supply chain manager and materials manager resulting in improved approach to contracting and GPO management.
Revenue Cycle	Centralized revenue cycle leadership positions across system to improve standardization and facilitate using staff interchangeably across system; built local hospital accountability for revenue cycle through hospital CFOs. Centralized all general accounting functions to materially decrease error, improve payment cycle and internal controls.
Medical Staff	Drafting system-wide Medical Staff Bylaws that will facilitate reduction of overlapping Medical Staff Committees and enable physicians to practice across the system without redundant credentialing at each site. Consolidated clinical departments under System Chairs.
Human Resources	Centralized and restructured Human Resource function through identifying and standardizing critical job duties required to support the evolving CCHHS service delivery model. Policies and practices will be consistent across the System.

# Redesign - Key Accomplishments

Areas of Focus	Accomplishments
Leadership	<p>Established leadership and departmental structure for important system-wide functions such as Compliance, Diversity and Multi-cultural Affairs, Internal Audit, Public Relations, Performance Improvement, Business Development, General Counsel, System Risk Management, and Quality.</p> <p>Implemented facility COO management changes, coaching initiatives, and monthly operating reviews to improve performance and accountability.</p>
Clinical Operations- Nursing, Pharmacy, Peri-op	<p>Created and staffed key department level positions:</p> <ul style="list-style-type: none"> <li>- Assistant Director of Pharmacy- focus on system-wide quality/compliance</li> <li>- System Director Nursing Professional Development- focus on professional development and standardization of policies and procedures</li> <li>- System Director Clinical Informatics- standardize Nursing documentation</li> </ul>
Medical Staff	<p>Initiated Physician Assistant Program and increased use of PA's in place of reduced resident hours for improved use of mid-level providers</p>
Human Resources	<p>Created and staffed key system level positions:</p> <ul style="list-style-type: none"> <li>- System Labor Relations Director</li> <li>- System Human Resources Generalist</li> <li>- System Nurse Recruiter</li> </ul>

# Future Development



Areas of Focus	Strategy	Future Action
Decision Support	Redesign	Develop system-wide decision support function
Medical Staff	Centralization	Organize under one medical staff
Revenue Cycle	Centralization	Complete centralization, training, and recruitment
Quality	Centralization	Build centralized organizational structure
Care Management	Redesign/ Centralization	Develop new system-wide care management model
Service Line(s)	Redesign	Develop system-wide service line leadership
Leadership Development	Redesign	Hire System Director of Leadership Development and Training Develop and Implement Leadership Development Program

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ATTACHMENT #3

## CCHHS Personnel H1N1 Vaccination Program Summary through 04/30/2010

Facility	Number H1N1 Vaccines Administered	Medical Contraindication Documentation	H1N1 Vaccine Received Outside	Approximate Employee Number	Approximate Personnel Number	Employee Compliance %	Personnel Compliance %
Stroger Hospital/ACHN	3467*	33	16	4114	5594	3516*/ 4114  <b>85%</b>	3516/ 5594  <b>63%</b>
Cermak/ CCJDC	430	0	25	421  Includes 11 on LOA	487 Includes 11 on LOA	393/ 410 Minus 11 on LOA  <b>96%</b>	455/ 476 Minus 11 on LOA  <b>96%</b>
CCDPH	312	18	3	336  Includes 6 on LOA	339 Includes 6 on LOA	330/ 330 Minus 6 on LOA  <b>100%</b>	333/ 333 Minus 6 on LOA  <b>100%</b>
Oak Forest Hospital	844	16	12	949  Includes 28 on LOA	1339 Includes 28 on LOA	813/ 921 Minus 28 on LOA  <b>88%</b>	872/ 1311 Minus 28 on LOA  <b>67%</b>
Provident Hospital	619	17	55	650 Includes 19 on LOA	850 Includes 19 on LOA	467/ 631 Minus 19 on LOA  <b>74%</b>	691/ 831 Minus 19 on LOA  <b>83%</b>
<b>Total</b>	<b>5,672</b>	<b>84</b>	<b>111</b>	6470  Includes 64 on LOA	8609 Includes 64 on LOA	5519/ 6406  <b>86%</b>	5867/ 8545  <b>69%</b>

- \*Stroger H1N1 Vaccine number includes vaccines administered to all personnel categories
- Compliance includes number of staff receiving H1N1 vaccine through CCHHS or other site, or documenting medical contraindication.
- Personnel numbers have fluctuated during flu season and number currently listed c/w previous number..
- LOA(Leave of Absence) – Sites other than Stroger reported the number of employees currently on leave of absence that were subsequently not included in the denominator of individuals expected to receive vaccine.

Prepared by the Office of: John H. Stroger, Jr. Hospital of Cook County EHS